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11-01-04

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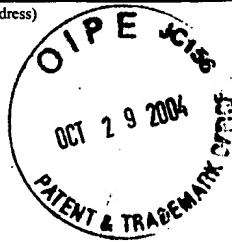
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7590

08/20/2004

Alan H. Thompson
 Assistant Laboratory Counsel
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April Masluk	(Depositor's name)
<i>April Masluk</i>	(Signature)
10-28-04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/771,387	01/26/2001	Luis E. Zapata	IL-10792	6864

TITLE OF INVENTION: EDGE-FACET PUMPED, MULTI-APERTURE, THIN-DISK LASER GEOMETRY FOR VERY HIGH AVERAGE POWER OUTPUT SCALING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665 <i>685</i>	\$300	\$965 <i>985</i>	11/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS	11/01/2004 ZJUHA2 00000092 120695 09771387
FLORES RUIZ, DELMA R	2828	372-070000	01 FC:2501 685.00 DA 02 FC:1504 300.00 DA 03 FC:8001 30.00 DA

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list:
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. John P. Wooldridge
2. Alan H. Thompson
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Regents of the University of California Oakland, CA (USA)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies Ten (10) \$30.00

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature) _____ (Date) 10/7/04

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